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10:	Registration S Division of Co							
CHDI	ECT: YTG HAF	RVEST VENTURES 1, 1.	P					
SOD		oreign Limited Partnershi	p or Lim	ited Liabilit	y Limite	d Partnership)	_	
The e	nclosed Notice o	of Cancellation and fo	ec(s) are	submitte	d for fi	ling.		
Please	e return all corre	spondence concernin	g this n	natter to:				
ALEX	ANDRA LOGAN							
		(Contact Person)						
TPA C	GROUP, LLC				_			
		(Firm/Company)						
1776 I	PEACHTREE ST N	IW, STE 100						
		(Address)			-			
ATLA	NTA, GA 30309							
	(C	ity, State and Zip Code)			•			
For fu	irther informatio	on concerning this ma	itter, ple	ease call:				
ALEX	ANDRA LOGAN		at (70	436-19	94	25	
	(Name of Contac	et Person)	<u> </u>	(Area Code	and Day	time Telephone Number)	: : : : : : :	
Enclo	sed is a check fo	or the following amou	int:				(S)	
\$ 52	2.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		05.00 Filing d Certified	_	S113.75 Filing Fee. Certified Copy, and Certificate of Status	XX	
Mailing Address: Registration Section Division of Corporations				Street Address: Registration Section Division of Corporations				
P.O. Box 6327				The Centre of Tallahassee				
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

YTG HARVEST VENTURES 1, LP			
(Name of foreign limited pa	artnership or lin	nited liability limited partnership)	
B15000000330			
(Florida Docume	nt Number of th	ne Foreign LP or LLLP)	
DELAWARE			
(Ju	risdiction of fo	rmation)	
DECEMBER 2, 2015			
(Date authori	zed to transact b	ousiness in Florida)	
This foreign limited partnership or litransacting business in Florida and vs. 620,1907, F.S.			
This entity appoints the Florida Deprights of action arising out of the tra		-	ocess for
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	of filing: than 90 days aj	fter the date this document is filed by th	 ve Florida
NOTE: If the date inserted in this be requirements, this date will not be liberartment of State's records.			ling 20
Signature of a general partner:			
Typed or printed name:		_	*
J Bradford Smith			
o bradiord offside			
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		